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**REPLACEMENT PARAGRAPH AT PAGE 8, LINE 1**

a1 FIG. 1 illustrates one embodiment of a medical instrument 10 according to the present invention. In general, the medical instrument includes a body 13, a tissue grasping element 14, and an actuating member 16. The body 13 mates the tissue grasping element 14 with the actuating member 16, and can have any shape and can be any type of connector, or similar device. In one embodiment, the body 13 is a rivet or screw which forms a pivot point between the tissue grasping element 14 and the actuating member 16. Alternatively, the body 13 can be a separate element disposed around pivot point to join the tissue grasping element 14 and the actuating member 16, or it can be formed integrally with the tissue grasping element 14 and the actuating member 16.

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**REPLACEMENT PARAGRAPH AT PAGE 9, LINE 25**

Once the tissue is firmly grasped by the medical instrument 10, the flexible member 18 can be used to retract and position the body organ. The flexible member 18 includes a proximal, free end 19 that is selectively fastenable to a support (not shown), and a distal end mated to the body 13, or any other part of the medical instrument 10. A rivet, screw, snap, buckle, adhesive, or similar attachment member can be used to secure the flexible member 18 to the body 13. Similarly, the free end 19 of the flexible member 18 can include a snap, buckle, hook and eye closure, or similar device for tying or securing the flexible member 18 to a support. The length of the flexible member 18 should be sufficient enough to allow the flexible member 18 to extend from the body organ to the support or some other position outside the body. In use, tension is applied to the flexible member 18 to retract and position the body organ (or tissue). The free end 19 of the flexible member 18 can then be secured to a support (not shown) to maintain the organ (or tissue) in a desired position.

**REPLACEMENT PARAGRAPH AT PAGE 10, LINE 18**

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Q3 The housing 12 of medical instrument 20 is generally elongate and includes a first surface 53, a second surface (not shown) opposed to the first surface, and side surface 55 connecting the first and second surfaces. The first, second, and side surfaces 53, 55 define a cavity for receiving medical instrument 10. The side surface 55 includes two opposed proximal openings 81a, 81b from which the actuating members 16a, 16b of medical instrument 10 extend, and two opposed distal openings 82a, 82b from which the tissue penetrating claws 14a, 14b of medical instrument 10 extend. The proximal openings 81a, 81b should have a size substantially the same as the length of the actuating members 16a, 16b so as to allow a portion of the actuating members 16a, 16b to extend therefrom. The distal openings 82a, 82b, on the other hand, should be of a sufficient size to allow the tissue penetrating claws 14a, 14b to move between the open and closed positions, respectively. Preferably, the distal openings each have a length of between about 3 to 8 mm. The size of the housing or body 12 should be sufficient to hold the medical instrument 10 therein, and should have a width less than the width of the actuating members 16a, 16b to allow the actuating members 16a, 16b to protrude there from.

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**REPLACEMENT PARAGRAPH AT PAGE 11, LINE 10**

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ay Medical instrument 10 can be mated to, or merely disposed within, the housing or body 12. For example, the actuating members 16a, 16b and the tissue grasping element 14 can be molded into the housing 12, or they can be pivotably attached to the housing 12 with a securing device, such as with the body 13, which may be in the form of a rivet or screw as described above with respect to FIG. 1. Thus, the body 13 can extend through the first surface 53 of the housing 12, the tissue grasping element 14 and actuating member 16, and the second surface of the housing 12. A rivet, screw, rod, or similar attachment device can be used secure the actuating members 16a, 16b and the tissue grasping element 14 to the housing 12.

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**REPLACEMENT PARAGRAPH AT PAGE 11 LINE 19**

*as* The flexible member 18' is similar in placement and operation to that described with respect to FIG. 1, however, the distal end (not shown) of flexible member 18' can be mated to the housing 12, rather than the body 13. The proximal end 19' of the flexible member 18', as well as the proximal end 28 of the applicator sleeve 22, can have a shape and size adapted to provide an improved gripping surface, and to allow the medical instrument 20 to be secured to a support (not shown). In use, the flexible member 18' is disposed within the applicator sleeve 22 to allow the applicator sleeve 22 to slidably move with respect to the housing 12.

**REPLACEMENT PARAGRAPH AT PAGE 11, LINE 27**

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24 The applicator sleeve 22 has a substantially rigid elongate body and it is effective to depress the actuating members 16a, 16b, and thereby move the tissue grasping element 14 to the open position. The applicator sleeve 22 includes an inner cavity which can be dimensioned to fit slidably over the housing 12 and the flexible member 18'. The sides of the applicator sleeve 22 should conform to the sides of the housing 12, such that movement of the applicator sleeve 22 over the housing 12 will depress the actuating members 16a, 16b. The proximal end 28 of the applicator sleeve 22 can include one or more openings 24a, 24b to enable a portion of the flexible member 18' to be grasped with respect to the sleeve 22, thereby preventing movement of the applicator sleeve 22. The length and width of the applicator sleeve 22 can vary depending on the size of the housing 12. In one embodiment, the applicator sleeve preferably has a length of 15 cm and a width of 15 mm.

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**REPLACEMENT PARAGRAPH AT PAGE 12, LINE 20**

a7 In one embodiment, the flexible member 18' is pulled through the inner lumen of the applicator sleeve 22 and held with tension to secure the applicator sleeve 22 onto the housing 12. The applicator sleeve 22 is then used to manipulate the body 12 and cause the tissue grasping element 14 to grasp or penetrate tissue 60. The flexible member 18' can then be released and the applicator sleeve 22 slid off of the body 12. Tension can then be applied to flexible member 18' to retract and position the body organ (or tissue). The free end 19' of the flexible member 18' can then be secured to a support (not shown) to maintain the organ (or tissue) in a desired position.